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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 13 AM 11:12

DOCUMENT # K39690

(8)

1. Corporation Name

CITRUS ROAD BORING, INC.

Principal Place of Business

9302 DENTON AVE
HUDSON FL 34667
US

Mailing Address

9302 DENTON AVE
HUDSON FL 34667
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/17/1988

3a. Date of Last Report

06/10/1994

4. FEI Number

59-2916901

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 9302 DENTON AVE

2a. Mailing Address

26 9302 DENTON AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 HUDSON FL

City & State

28 HUDSON FL

Zip

24 34667

Country

25 US

Zip

29 34667

Country

30 US

9. Name and Address of Current Registered Agent

MCCANNA, RICHARD E III
3968 S EMMA JANE TERR.
HOMOSASSA FL 32647

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Richard E. McCanna III

PRESIDENT
RICHARD E. MCCANNA III

1-24-95

(Signature, typed or printed name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPS
MCCANNA, RICHARD E III
3968 S EMMA JANE TERR
HOMOSASSA FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.032(4)(b), Florida Statutes. Further, I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Richard E. McCanna III

RICHARD E. MCCANNA III

1-24-95 813.8639647

(Signature and typed or printed name of signing officer or director)

(Typed Name)